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ABSTRACT

Over the years, the nursing educational system has prepared nurses for the many settings in which health care is delivered. As health care shifts from a fragmented system of disparate providers and payers to integrated management systems, nurses and other health care professionals are experiencing tremendous changes. The nursing education system must continue to produce the most qualified nurses to deliver cost-effective and quality care. Educational mobility in nursing is the vehicle by which nurses and aspiring nurses gain new knowledge and skills through formal and informal educational offerings. Educational mobility should continue to focus on promoting high standards, maintaining the quality and integrity of baccalaureate and graduate programs, and emphasizing the attainment of program outcomes. The focus of higher learning should be on the socialization of student to new professional roles and the knowledge and skills needed for those roles. Educational mobility must encompass diverse approaches to continuous, life-long learning for nurses and those planning to become nurses. Higher education in nursing should be offered using creative and flexible approaches that are incorporated into curricula and reflect consideration of individual learning needs. Some strategies are suggested to implement these objectives. (SLD)

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Educational Mobility

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American Association of Colleges of Nursing

Publications

Educational Mobility

Position Statement: *As health care shifts from a fragmented system of disparate providers and payers into integrated managed systems, nurses and other health professionals are encountering tremendous changes. The environments in which nurses practice are becoming increasingly diverse, and the skills required to practice in these settings are becoming increasingly specific to the services offered and the patients served. Advances in health-related technologies call for enhanced knowledge and application of computing and other technical skills. Nurses are faced with complex ethical dilemmas created by rationing-of-health-care decisions and research advances such as the human genome project. Practicing nurses must continue to update their skills as their work environments adapt to reforms in health care delivery. Further, nurses' practice will be influenced by changes in the regulatory system that will accompany multi-state recognition of licensure.*

Over the years, the nursing educational system, through multiple entry and exit routes, has prepared nurses for the variety of settings in which health care is delivered. The nursing educational system must continue to produce the most qualified and prepared nurses to deliver cost-effective and quality care. Nurse educators must continue to analyze health care trends and create flexible curricula that provide individuals with the skills and knowledge needed for diverse settings. Further, nurse educators must continue to offer continuing education for nurses as they fine-tune skills for new settings.

Educational mobility in nursing is the vehicle by which nurses and aspiring nurses gain new knowledge and skills through formal and informal educational offerings. Educational mobility serves the public, the profession, and the individual nurse. Educational mobility should continue to focus on promoting high standards, maintaining the quality and integrity of baccalaureate and graduate programs, while emphasizing the attainment of program outcomes. The focus of higher learning should be on the socialization of students to new professional roles and the knowledge and skills needed for these roles.

Educational mobility options should respect previous learning that students bring to the educational environment. To this end, educational mobility encompasses diverse approaches to continuous, life-long learning for nurses and for individuals aspiring to nursing as a profession. Baccalaureate and higher-degree programs in nursing should build on knowledge and skills attained by learners prior to their matriculation in formal educational programs. Higher education in nursing should be offered using creative and flexible approaches that are incorporated into curricula and reflect consideration of individual student learning needs.

Definition

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Educational mobility -- a process by which individuals complete formal and/or informal educational offerings to acquire additional knowledge and skills. To the extent possible, educational mobility should build on previous learning without unnecessary duplication of that learning and be focused on outcomes.

Background

The history of nursing education in the U.S. revolves around meeting health care needs of people within the context of the times and events. Today, nursing education continues to offer three primary avenues to licensure -- the diploma, the associate degree, and the baccalaureate degree. In addition, some nursing educational programs offer master's or doctoral programs leading to licensure.

Despite the differences in educational requirements and outcomes for these initial licensure programs, RNs with differing educational backgrounds continue to be employed in settings that do not differentiate role responsibilities based on educational preparation. Many factors have contributed to the syndrome of "a nurse is a nurse is a nurse," including economic and practical realities. Most employment settings compensate nurses equally, without regard for educational preparation, since these settings do not require RNs to work in differentiated capacities. In addition, the chronic shortages of RNs have contributed to the practical reality of employing RNs in similar capacities despite educational background.

With the explosion of knowledge in health care and the enormous changes in health care delivery systems, employers of nurses can ill afford to employ RNs who do not possess requisite knowledge and skills for new and emerging settings. Various sites have developed and tested differentiated practice models, in which nurses are hired into associate or primary roles depending upon their educational and experiential backgrounds.[1] Indeed, the American Organization of Nurse Executives, the National Organization for Associate Degree Nursing, and the American Association of Colleges of Nursing contributed to the development of a model for differentiated nursing practice, based largely on the Healing Web project. [2]

Although there continue to be multiple entry and exit opportunities for nursing education, little is known about the numbers of nurses with different educational backgrounds needed for the emerging health care system. From the quadrennial survey conducted by the federal Division of Nursing in 1996, the following describe RNs in the U.S.:

- There are more than 2.5 million RNs in the U.S., and almost 83 percent are employed in nursing.
- The average (mean) age of RNs is 44.3 years.
- Ten percent of RNs (246,363 of 2,558,874) represent racial/ethnic minorities.
- Of employed RNs, 58.4 percent have less than a BSN as the highest nursing-related educational credential. Almost 32 percent have a baccalaureate degree in nursing, 9.1 percent are master's-prepared, and only 0.6 percent are doctorally prepared.
- The projected number of graduates from basic educational programs is predicted to remain essentially stable through 2020, with the majority continuing to graduate from associate-degree programs.

- Sixty percent of employed RNs are working in hospital settings, 17 percent are employed in community or public health settings, and 8 percent are employed in nursing homes or extended care facilities.[3]

These data indicate that educational mobility opportunities will abound in the foreseeable future, both at the undergraduate and graduate levels, to increase the numbers of graduates in general and specifically from racial and ethnic minorities. Baccalaureate and higher-degree programs in nursing should continue to include and expand educational mobility undergraduate and graduate curricular options.

Recommendations

Approaches to educational mobility should:

- be designed to attain and maintain educational integrity and program quality;
- enhance the socialization of students as members of the profession of nursing, as well as, foster achievement of personal goals and needs of individuals;
- focus on the attainment of outcomes that reflect a higher level of knowledge, skills, critical thinking, problem solving, social interaction, and effective professional citizenship;
- consider flexible admission criteria while focusing on exit criteria and standards; and
- include collaborative programs, where possible, for articulation and broader use of existing statewide and regional articulation models.

Implementation Guidelines

The following strategies are offered to AACN members for implementing the recommendations in appropriate settings:

- Continue to implement creative/innovative educational designs and delivery approaches that facilitate learning, including offering courses via distance learning technologies;
- Incorporate flexibility in curriculum design and methods of delivery to accommodate students with varied educational and experiential backgrounds;
- Encourage pilot projects that involve innovative admissions criteria, curriculum design, and methods of instructional delivery; · Share "models that work" in regular program sessions;
- Encourage research on the products of articulated nursing programs;
- Increase communication with secondary education to appropriately identify individuals who can pursue the baccalaureate degree in nursing as the entry level; and

- Create and share incentives for educational mobility at the baccalaureate and higher-degree levels, including scholarships and working collaborations with care delivery systems.

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